U S Department of Labor
Office of Labor Management
Standards
Washington DC 20210

FORM LM-30
LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P L 86-257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440

For Official Use Only
Rec'd
APR 5 2006
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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U *18128*	2 Fiscal Year Covered From

2 Fiscal Year Covered From $\boxed{1}$ / $\boxed{1}$ / $\boxed{05}$ Through $\boxed{12}$ / $\boxed{31}$ / $\boxed{05}$

3 Name and address of person filing

Name *Gerald* *W* *McEntee*

P O Box Bldg Room No if any

Street *1625 L St NW*

City *WASH*

State *DC* ZIP Code + 4 *20036*

4 Name file number and address of labor organization

Name *AFSCME*

Labor Organization File Number *000-289*

P O Box Building and Room Number if any

Street *1625 L St NW*

City *WASH*

State *DC* ZIP Code + 4 *20036*

5 Position in labor organization

Enter appropriate data below If during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests
(except as specified in the exclusions set forth in the instructions)

A Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value **from an employer whose employees your organization represents** or is actively seeking to represent

6 Name and address of Employer (including trade name if any)

Name *Harvard Law School*

Trade Name if any

P O Box Bldg Room No if any

Street *125 Mt Auburn St - 3rd fl*

City *Cambridge*

State *MA* ZIP Code + 4 *02138*

7 a Nature of Interest Transaction or Income

Participation in 2005 Union Leader Institute
- 2 nights lodging
- meals

7 b Amount

$731.76

Signature

15 Signature and verification The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned s knowledge and belief true correct and complete (See the section on penalties in the instructions)

Signed *[signature]* On *3/28/06* *202-429-1100*

Date Telephone Number

Form LM-30 (2003)